

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re: Attorney Docket No. 1039.017

In re application of:

Ricardo J. Motta and Robert WeinschenkSerial No.: 10/045,877Group Art Unit: 2876Filed: 11/07/01Examiner: Sanders, Allyson N.Matter No.: PtXIM 048/119Phone No.: 703-305-5779For: Imaging System with Built-in DiagnosticsAMENDMENT TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

[] No additional fee for claims is required.

	Claims After Amendment	Highest No. Previously Paid For	Present Extra	Additional Fee
Total	35 31	minus 35 =	0 x 9 =	\$--
Independent	9	minus 3 =	6 x 42 =	\$252
Multiple Dependent Claim(s), if applicable			0 x 140 =	\$0
			TOTAL FEE	\$252

[] It is hereby petitioned for an extension of time in accordance with 37 C.F.R. §1.136(a). The appropriate fee required by 37 C.F.R. §1.17 is calculated as shown below.

Response filed within:

[] first - \$ 55.00

[] second - \$ 205.00

[] third - \$ 465.00

[] fourth - \$ 725.00

[] fifth - \$ 985.00

month after time period set

[X] A check in the amount of \$252.00 is enclosed.[] Please charge **Mendelsohn & Associates, P.C. Deposit Account No. 50-0782** the amount of \$____. A duplicate copy of this sheet is attached.[X] The Commissioner is hereby authorized to charge any underpayment of the following fees associated with this communication or credit any overpayment to **Deposit Account No. 50-0782**. A duplicate copy of this sheet is attached.

[X] Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

[X] Any patent application processing fees under 37 C.F.R. §1.17.

Date:

9/10/03
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